

## MMBA PETITION FOR BOARD REVIEW

DO NOT WRITE IN THIS SPACE: Case No.: Date Filed:

1. PUBLIC AGENCY (Name, address and telephone number)

INSTRUCTIONS: A Petition for Board Review must be filed with the appropriate PERB regional office (see PERB Regulation 32075), and may ONLY be filed within 30 days following exhaustion of administrative remedies available under applicable local rules. Proper filing includes concurrent service and proof of service of the MMBA Petition for Board Review as required by PERB Regulation 60000(b). Attach additional sheets if more space is required. Copies of the original petition, the public agency's final determination and any related materials must be attached.

Public Agency's agent to be contacted:

|  | Title:   |
|--|--|
|  | Address and telephone number, if different:  |
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| 2. PETITIONER (Name, address and telephone number)       | Petitioner's agent to be contacted:  |
|  |  |
|  |  |
|  | Title:   |
|  | Address and telephone number, if different:  |
|  | •  |
|  |  |
| 3. INTERESTED PARTY (Name, address and telephone number) | Interested party's agent to be contacted: (Name, address and telephone number, if different) |
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| 4. DATE OF FINAL PUBLIC AGENCY DETERMINATION:            |  |
|  |  |
|  |  |

Los Angeles Regional Office 3530 Wilshire Blvd., Suite 1435 Los Angeles, CA 90010-2334 (213) 736-3127 Sacramento Regional Office 1031 18<sup>th</sup> Street Sacramento, CA 95814-4174 (916) 322-3198 San Francisco Regional Office 1330 Broadway, Suite 1532 Oakland, CA 94612-2514 (510) 622-1016

| 5. STATEMENT OF THE ISSUE(S) IN DISPUTE:   |             |
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| 6. SPECIFIC ACTION REQUESTED OF THE BOARD:   |             |
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| I declare that the statements herein are true to the best of my knowledge and belief, and that this petition is accompanied by a copy of the |             |
| public agency's final determination as required by PERB Regulation 60000(c)(4).  |             |
| PETITIONER'S AUTHORIZED REPRESENTATIVE:  |             |
|  | (Signature) |
| Title:   | Date:       |
| Title.   | Date:       |